

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name American Federation of Labor Congress of Industrial Organizations
 (b) Address (number and street) ☐ check if different than previously reported 815 16th Street, NW
 (c) City, State and ZIP Code Washington, DC 20006
 (d) Name of Employer or Principal Place of Business _____
 (e) Occupation _____

2. FEC Identification Number

C

3. Is This Statement

X New
or

Amended

4. Covering Period

08 26 2008
through

08 29 2008

5. (a) Date of Public Distribution(s) 08 29 2008(b) Communication Title Media Buys - Radio

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes

No X

8. Custodian of Records

(a) Name Richard Trumka, Secy Treasurer
 (b) Address (number and street) 815 16th Street, NW
 (c) City, State and ZIP Code Washington, DC 20006
 (d) Name of Employer or Principal Place of Business _____
 (e) Occupation _____

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

95,096.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

RICHARD TRUMKA

SIGNATURE

Richard Trumka

DATE

8/29/08

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

FEC FORM 9 (REV. 12/2007)